

1 John B. Perog  
 2 Name of Attorney for Plaintiff/Name of Plaintiff (if pro se)

3 10: General Delivery Mail Pick-Up  
 4 Address

5 NOVATO, CA. 94949

6 (415) 375-1331  
 7 Telephone Number

8 No Fax #  
 9 Facsimile Number

10 N/A  
 11 State Bar Number of Attorney

12 UNITED STATES DISTRICT COURT  
 13 NORTHERN DISTRICT OF CALIFORNIA

14 John B. Perog  
 15 Plaintiff,

16 v.  
 17 Michael J. Astrue  
 18 Commissioner of Social Security.

Defendant.

CV 08

2094

Case No.

**COMPLAINT FOR JUDICIAL REVIEW  
 OF DECISION OF COMMISSIONER  
 OF SOCIAL SECURITY**  
 (Administrative Procedure Act Case)

19 The above-named plaintiff makes the following representations to this court for the purpose of  
 20 obtaining judicial review of a decision of the defendant adverse to the plaintiff:

21 1. The plaintiff is a resident of NOVATO  
 22 California  
 23 State City

24 2. The plaintiff complains of a decision which adversely affect the plaintiff in whole or in part.  
 25 The decision has become the final decision of the Commissioner for purpose of judicial review and bears  
 26 the following caption:

27 ///

28 ///

///

COMPLAINT

FILED  
 08 APR 22 AM 11:57  
 RICHARD M. YERGEN  
 U.S. DISTRICT COURT  
 NORTHERN DISTRICT OF CALIFORNIA

WHA

1 In the case of:

2 John B. PROG  
3 Claimant

Claim for:

4 Atty. Fee Readjustment  
5 Type of Benefit  
6 3992  
7 Last Four Digits of Social Security Number

8 Wage Earner (Leave blank if same as above)

9

10 3. The plaintiff has exhausted administrative remedies in this matter and this court has jurisdiction  
11 pursuant to Title 42, U.S.C. §405(g).

12 WHEREFORE, the plaintiff seeks judicial review by this court and the entry of judgment for such  
13 relief as may be proper, including costs.

14 DATE:

15 April 22, 2008

16 [Signature]  
17 Signature of Attorney or Plaintiff Appearing Pro Se  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28

N:\DOCS\INTAKE\CIVIL\SocSecComplaintForm.wpd